

## Supplement to the FY 2014 IntegratedEthics Program Achievement: Goals and Reporting Requirements

### EC2 Program Metric - Improving Use of the CASES Approach

The following provides additional guidance for reporting requirements and technical specifications for EC2 as part of the FY 2014 IntegratedEthics Ethics Consultation Programmatic Achievement.

Please see the full reporting requirements document for complete details (located at: <http://vaww.ethics.va.gov/integratedethics/ieprogrpt.asp>).

**EC2—Goal:** The Ethics Consultation Coordinator (ECC) will develop and implement a quality improvement plan for the ethics consultation service (ECS) based on systematic evaluation of the service’s use of the CASES approach.

**Requirement:** The ECC will collaborate with the IE Council to develop a plan to improve the ECS use of the CASES approach based on systematic evaluation of case consultation data in ECWeb.

To achieve EC2, each facility must systematically assess performance of their ECS in using the CASES approach based on an analysis of case consult data entered in ECWeb. Facilities should identify an ethics issue (i.e., a performance gap) in which the ECS’s current performance does not meet standards established for the CASES approach, discuss reasons why there is a performance gap, and determine what strategies are most likely to close the gap. The improvement plan should describe the following elements: Ethics Issue; Source of Ethical Standard; Ethical Standard Description with Exclusions; Best Ethics Practice (“Should” Statement); Current Ethics Practice; National Comparison Data; Improvement Goal; Strategies; and Result.

Below, please see four examples of improvement plans. We recommend you use one of these examples or a similar example that pertains to your facility. Please note that the strategies included in these examples are merely suggestions and may not be appropriate for all settings. We encourage you to develop local strategies that are individualized to your facility. If you wish to work on an ethics issue other than the ones described below, contact the IE Manager for Ethics Consultation for assistance. Your PE team can also be helpful in clarifying an ethics issue and developing strategies that can close the associated quality gap. Once developed, the plan must be submitted to the National Center for Ethics in Health Care as per the IE Program Achievement: Goals and Reporting Requirements.

For assistance or questions, please contact the IE Manager for Ethics Consultation at [vhaethics@va.gov](mailto:vhaethics@va.gov).

Ethics Issue	Source of Ethical Standard	Ethical Standard Description with Exclusions	Best Ethics Practice ("Should" Statement)	Current Ethics Practice	FY 13 National Comparison Data	Improvement Goal	Strategies	Result
Facility ethics consultation services do not consistently make contact with patients as part of an ethics case consultation.	<a href="#">EC Primer</a> p. 34.	<p>"A [...] visit with the patient is desirable in all ethics case consultations, except those in which the individual patient's perspective is not ethically relevant to resolving the concern."</p> <p>Exclusions:</p> <ol style="list-style-type: none"> <li>1. The consultant and the patient are separated geographically (e.g., the patient is receiving home care) and alternate means of contact (e.g., video conference, telephone) are not available.</li> <li>2. Patient's perspective is not ethically relevant to resolving the concern.</li> </ol>	<p>Ethics case consultations should include patient contact unless the consultant and the patient are separated geographically and alternate means of contact are not available, or the patient's perspective is not ethically relevant to resolving the concern.</p>	<p>Numerator: Case consults in the prior four quarters in which consultants had contact with the patient.</p> <p>Denominator: Total case consults in the prior four quarters minus the number of case consults with exclusions for patient contact.</p> <p>Determined by reviewing individual ECWeb consult records from the appropriate time period and hand calculating the numerator/denominator.</p> <p>Currently, our consultants had contact with the patient in ___% of ethics case consultations.</p>	<p>Case consults in which the patient was contacted is 65%.</p> <p>Note: Data not adjusted for exclusions.</p>	<p>Increase the annual percentage of case consults that meet the best ethics practice standard for patient contact from ___% to ___% by Q4 FY 2014.</p>	<p><i>Include strategies determined in response to locally identified causes of the ethics quality gap. Examples below.</i></p> <ol style="list-style-type: none"> <li>1. Change consult intake script to include a standard practice of making face-to-face contact with the patient as part of the consultation process.</li> <li>2. Train the consult service members on the ethical standard and its exclusions.</li> </ol>	<p>Increased the percentage of case consults that meet the best ethics practice standard for patient contact from ___% to ___%.</p>

Ethics Issue	Source of Ethical Standard	Ethical Standard Description with Exclusions	Best Ethics Practice ("Should" Statement)	Current Ethics Practice	FY 13 National Comparison Data	Improvement Goal	Strategies	Result
<p>The ethics consultation service does not routinely notify the attending physician that a case consultation has been requested, prior to contacting the patient.</p>	<p><a href="#">EC Primer</a> p. 37.</p>	<p>"Prior to making direct contact with the patient, the ethics consultant should notify the patient's attending physician that an ethics consultation was requested."</p> <p>Exclusions: none.</p>	<p>Ethics consultants should notify the attending physician that an ethics consultation has been requested on his or her patient, prior to making direct contact with the patient.</p>	<p>Numerator: Case consults in the prior four quarters in which consultants notified the attending physician.</p> <p>Denominator: Total case consults in the prior four quarters in which an ethics consultant made direct contact with the patient.</p> <p>Determined by reviewing individual ECWeb consult records from the appropriate time period and hand calculating the numerator/denominator.</p> <p>Currently, our consultants notify the attending physician that an ethics consultation was requested prior to making direct contact with the patient ___% of the time.</p>	<p>Case consults in which the attending physician was notified is 93%.</p> <p>Note: Data not adjusted to account for cases in which the ethics consultant did not make direct contact with the patient.</p>	<p>Increase the annual percentage of case consults that meet the best ethics practice standard for notifying the attending physician from ___% to 100% by Q4 FY 2014.</p>	<p><i>Include strategies determined in response to locally identified causes of the ethics quality gap. Examples below.</i></p> <ol style="list-style-type: none"> <li>1. Change the consult intake script to include a standard practice of notifying the attending physician as part of the consultation process.</li> <li>2. Review with the ethics consultation service the ethical standard.</li> <li>3. Make a brief presentation at a service chief meeting, or similar, to notify attending physicians of the ethics standard.</li> </ol>	<p>Increased the percentage of case consults that meet the best ethics practice standard for notifying the attending physician from ___% to ___%.</p>

Ethics Issue	Source of Ethical Standard	Ethical Standard Description with Exclusions	Best Ethics Practice ("Should" Statement)	Current Ethics Practice	FY 13 National Comparison Data	Improvement Goal	Strategies	Results
<p>Our ethics consultation service does not consistently evaluate our consultations using the EC Feedback Tool, as specified in the CASES approach.</p>	<p>The <a href="#">Ethics Consultation Feedback Tool</a> and the <a href="#">EC Primer</a> p. 47.</p>	<p>"Ethics consultation services should also evaluate their consultations more formally with the aim of continuously improving their practices."</p> <p>"The ECC should ensure that the Feedback Tool is distributed regularly and consistently to everyone who had significant involvement in the ethics consultation, including the requester, clinicians involved in the patient's care, and (for case consultations where the patient or family was the requester) the patient and family."</p> <p>Exclusions: None.</p>	<p>The Ethics Consultation Feedback Tool should be sent to at least one party.</p> <p>Note: Because there is no easy way to determine the full list of parties meeting the ethics standard, the "should" statement was changed to a proxy standard that is easy to measure—the feedback tool should be sent to at least one party.</p>	<p>Numerator: Consults from the prior four quarters where the Ethics Consultation Feedback Tool was sent to at least one party (i.e., those with a status of: pending evaluation, evaluated, or no evaluation response).</p> <p>Denominator: Total consults from the prior four quarters (i.e., those with a status of: pending evaluation, evaluated, no evaluation response, or finished).</p> <p>Determined by reviewing ECWeb consult records from the appropriate time period in the ECWeb Evaluation Report. Currently, __% of consults had the Feedback Tool sent to at least one party.</p>	<p>64% of consultations had the EC Feedback Tool sent to at least one party.</p>	<p>Increase the annual percentage of consults that meet the best ethics practice standard for obtaining feedback from __% to __% by end of Qtr 4 FY 2014.</p>	<p><i>Include strategies determined in response to locally identified causes of the ethics quality gap. Examples below.</i></p> <ol style="list-style-type: none"> <li>1. Assign an <a href="#">ECWeb Evaluator</a> to the role and train them using the <a href="#">ECWeb Online Learning Module</a>.</li> <li>2. Change consultation intake script to describe the practice of requesting feedback as part of the consultation process.</li> </ol>	<p>Increased the percentage of case consults that meet the best ethics practice standard for obtaining feedback from __% to __%.</p>

Ethics Issue	Source of Ethical Standard	Ethical Standard Description with Exclusions	Best Ethics Practice ("Should" Statement)	Current Ethics Practice	FY 13 National Comparison Data	Improvement Goal	Strategies	Results
Our ethics consultation service does not always identify an ethically appropriate decision maker.	<a href="#">EC Primer</a> p. 47.	<p>"It is essential to determine who has the authority to make decisions about the case (e.g., patient, surrogate, attending physician). Consultants should consider the circumstances and identify the critical decision at stake, and then identify who is ethically appropriate to make that decision."</p> <p>Exclusions: None.</p>	<p>Ethics consultants should document an ethically appropriate decision maker in ECWeb.</p> <p>Note: Because there is no easy way to determine whether the consult service identified an ethically appropriate decision maker, the "should" statement was changed to a proxy standard that is easy to measure—document an ethically appropriate decision maker in ECWeb.</p>	<p>Numerator: Case consults from the prior four quarters in which an ethically appropriate decision maker is documented.</p> <p>Denominator: Total case consults from the prior four quarters.</p> <p>Determined by reviewing ECWeb consult records from the appropriate time period in the ECWeb Process Report. Currently, ___% of case consults have an ethically appropriate decision maker documented.</p>	79% of case consults in which an ethically appropriate decision maker is documented in ECWeb.	Increase the annual percentage of case consults that meet the best ethics practice standard for identifying an ethically appropriate decision maker from ___% to ___% by end of Qtr 4 FY 2014.	<p><i>Include strategies determined in response to locally identified causes of the ethics quality gap. Examples below.</i></p> <p>1. After initiating an ECWeb consult record, the consultant will create a reminder in ECWeb (located in the upper right hand menu) for the consultant to complete the ethically appropriate decision maker field within ___ weeks.</p>	Increased the percentage of case consults that meet the best ethics practice standard for identifying an ethically appropriate decision maker from ___% to ___%.